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CONFIRMATION NO. 5418

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| SERIAL NUMBER 10/041,856 | FILING OR 371(c) DATE 01/07/2002 RULE | CLASS 536 | GROUP ART UNIT 1634 | ATTORNEY DOCKET NO. 13572-105039US1 | |
| APPLICANTS Susan Slaughaupt, Quincy, MA; James F. Gusella, Framingham, MA; ** CONTINUING DATA ***** This appln claims benefit of 60/260,080 01/06/2001 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/06/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged | | STATE OR COUNTRY MA | SHEETS DRAWING 62 | TOTAL CLAIMS 43 | INDEPENDENT CLAIMS 9 |
| ADDRESS 65989 | | | | | |
| TITLE GENE FOR IDENTIFYING INDIVIDUALS WITH FAMILIAL DYSAUTONOMIA | | | | | |
| FILING FEE RECEIVED 1999 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |